



BARBARA K. CEGAVSKE
Secretary of State
Elections Division
101 North Carson Street, Suite 3
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Office of the
Secretary of State

Barbara Cegavske

Barbara Cegavske
Elections Division

JStokes

1/06/2016

#826

State of Nevada
**Committee for Political Action
(PAC)**
Registration Form

Page 1

ABOVE SPACE IS FOR OFFICE USE ONLY

☐ New Registration ☐ PAC (Advocating Passage or Defeat of a Ballot Question)

☒ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))

☐ Amended Registration: ☐ Change Officers ☐ Change Registered Agent ☒ Change Address
check all that apply

☐ Change Name ☐ Previous Name of PAC

☐ Other:

Name of Committee:

Farmers Employees and Agents Political Action Committee

Telephone:

702-401-6093

Mailing Address:

7455 Arroyo Crossing Parkway

Street Name, Number

City

89113

State Zip Code

PAC Active Email Address: robert.compan@farmers.com

PURPOSE: Briefly state the purpose for which the PAC was organized.

To support pro Business candidates on a state and local level.

REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent:

Robert L. Compan

Telephone:

702-401-6093

Physical Address:

7455 Arroyo Crossing parkway

Street Name, Number

Las Vegas

City

NV 89113

State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

☒

Signature of Registered Agent

Date:

01-06-2016



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OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title: _____ Telephone: 702-870-9980
Rick Schneider Chairman
Mailing Address: _____
2600 South Rainbow _____ Las Vegas NV 89146
Street Name, Number City State Zip Code
Telephone: 702-869-2200

Officer Name and Title: _____
MaryAnn Mangan Secretary Treasure
Mailing Address: _____
C/O Farmers Insurance 7501 West Lake Mead #104 Las Vegas NV 89128
Street Name, Number City State Zip Code
Telephone: 702-401-6093

Officer Name and Title: _____
Robert L. Compan Treasure
Mailing Address: _____
7455 Arroyo Crossing Parkway Las Vegas NV 89113
Street Name, Number City State Zip Code
Telephone: _____

Officer Name and Title: _____
Mailing Address: _____
Street Name, Number City State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization: _____ Telephone: _____
Mailing Address: _____
Street Name, Number City State Zip Code
Telephone: _____

Name of Organization: _____
Mailing Address: _____
Street Name, Number City State Zip Code
Telephone: _____

Name of Organization: _____
Mailing Address: _____
Street Name, Number City State Zip Code

SUBMITTED BY:

X *Robert L. Compan*
Signature of Representative of Group

Printed Name: _____
Robert L. Compan

Date: _____
01-06-2016

Telephone: _____
702-401-6093